BILL ANALYSIS

Senate Research Center

S.B. 126 By: Nelson; Schwertner Health & Human Services 7/3/2013 Enrolled

AUTHOR'S / SPONSOR'S STATEMENT OF INTENT

Contracted providers of community mental health and substance abuse services currently report performance and outcome measures to the Department of State Health Services (DSHS). However, this data is not made available to the public, making it difficult for consumers and other stakeholders to compare performance across providers.

S.B. 126 will increase transparency and accountability for state funding for community mental health and substance abuse programs and allow consumers and other stakeholders to compare outcomes across providers.

Specifically, S.B. 126 requires DSHS to develop and maintain a public reporting system to allow the public to view and compare performance and outcome measures across community mental health and substance abuse providers. The bill prohibits information posted as part of the public reporting system from including identifying information about individuals.

S.B. 126 amends current law relating to the creation of a mental health and substance abuse public reporting system.

RULEMAKING AUTHORITY

This bill does not expressly grant any additional rulemaking authority to a state officer, institution, or agency.

SECTION BY SECTION ANALYSIS

SECTION 1. Amends Subchapter D, Chapter 1001, Health and Safety Code, by adding Section 1001.078, as follows:

Sec. 1001.078. MENTAL HEALTH AND SUBSTANCE ABUSE PUBLIC REPORTING SYSTEM. (a) Requires the Department of State Health Services (DSHS), in collaboration with the Health and Human Services Commission (HHSC), to establish and maintain a public reporting system (system) of performance and outcome measures relating to mental health and substance abuse services established by the Legislative Budget Board (LBB), DSHS, and HHSC. Requires that the system allow external users to view and compare the performance, outputs, and outcomes of:

- (1) community centers established under Subchapter A (Community Centers), Chapter 534 (Community Services), that provide mental health services;
- (2) Medicaid managed care pilot programs that provide mental health services; and
- (3) agencies, organizations, and persons that contract with the state to provide substance abuse services.

SRC-KTA S.B. 126 83(R) Page 1 of 2

- (b) Requires that the system allow external users to view and compare the performance, outputs, and outcomes of the Medicaid managed care programs that provide mental health services.
- (c) Requires DSHS to post the performance, output, and outcome measures on DSHS's website so that the information is accessible to the public. Requires DSHS to post the measures quarterly or semiannually in accordance with when the measures are reported to DSHS.
- (d) Requires DSHS to consider public input in determining the appropriate outcome measures to collect in the public reporting system. Requires DSHS, to the extent possible, to include outcome measures that capture inpatient psychiatric care diversion, avoidance of emergency room use, criminal justice diversion, and the numbers of people who are homeless served.
- (e) Requires HHSC to conduct a study to determine the feasibility of establishing and maintaining the public reporting system, including, to the extent possible, the cost to the state and impact on managed care organizations and providers of collecting the outcome measures required by Subsection (d). Requires HHSC, not later than December 1, 2014, to report the results of the study to the legislature and appropriate legislative committees.
- (f) Requires DSHS to ensure that information reported through the public reporting system does not permit the identification of an individual.

SECTION 2. Requires DSHS to establish the public reporting system as required under Section 1001.078, Health and Safety Code, as added by this Act, not later than December 1, 2013.

SECTION 3. Requires DSHS to submit a report to the legislature and LBB on the development of the public reporting system as required by Section 1001.078, Health and Safety Code, as added by this Act, and the outcome measures collected.

SECTION 4. Effective date: September 1, 2013.

SRC-KTA S.B. 126 83(R) Page 2 of 2